

## ISLAND COUNTY PLANNING & COMMUNITY DEVELOPMENT

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www.islandcounty.net/planning

## TEMPORARY USE APPLICATION Event of Public Interest or Seasonal Farmer's Markets

GREYED SECTION	N FOR COUNTY USE C	ONLY - Type I De	cision Process	
Application Number Date Reco	eived F	Fee Paid	Receip	ot Number
Applicability. If you are planning to county zone except Rural Service (RS) before you finalize your plans. Event motor boat races, carnivals and circuse or assembly of persons if the primary pentertainment that may attract 100 or n Island County Sheriff's Department.	and Light Manufactus of Public Interest inc s. This application <u>de</u> surpose will be the pre	ring (LM), use this clude outdoor concess not apply to presentation of outdoor.	is form to request certs, auctions, a proposed entertain or, live or recor	st county review model hobby events, nment, amusement ded musical
Procedure. Please use this form to er your proposal. Type or neatly print all your time to provide complete answer applicable, explain why in the blank. It application together with the plot plan, and submit the complete application parapplication packages must include an Community Development.	application information and all the information incompatible and/or incompathe application fee, and chage to Island Country	on and provide the tion requested. It lete applications valued necessary documents and Company Planning and Compan	e signatures in bear of you believe any will not be accept mentation outlin ommunity Devel	tue ink. Please take y portion is not oted. Collate this ed in this application opment. The
Name of the Event				
Contact Person Name				
		e only party that will receive correspondence, and inquiries.)		
Street				
Phone ()		Maii Address		
Applicant Name				
Street				
Phone ()	E-l	Mail Address		
Parcel Owner Names(If other than the applicant)				
Street	Cit	City, State, Zip		
Phone ()				
Project Address (Or Closest Intersec Assessor's Parcel Number(s):				
Section Town				n
Legal Description of Parcel				
Location: North Whidbey Cer		South Whidbey	Camano	Island
I hereby certify that I am the owner (or the rules, regulations, and procedures wand information provided as part of this knowledge and belief. I agree to abide reverse side of this sheet. I also unders a delay in the review process.	with respect to preparise s submittal are in all reby the conditions of a	ng and filing this a espects complete, pproval establishe	application. All true and accurated by Island Cou	statements, answers te to the best of my nty and listed on the
Owners' Signature (All owners must sign*)	Date	Agent's Sig		Date
Owners' Signature *If there is not enough space for all prope	Date  erty owners' signatures	Owner's Sig	,	Date of consent signed by

\*If there is not enough space for all property owners' signatures, a separate written, notarized letter of consent signed by all owners may be attached to this application.

Name of Event					
Description and list of all activities for the proposed event	(attach additional pages if needed):				
Dates the event will take place	Hours of operation				
Dates the event will take place Hours of operation Is this an annually occurring event? If so, approval <u>may</u> be valid for up to 10 years					
Number of people expected to participate and attend the event.					
Attach a general plot plan drawn to a scale of not less					
feet. The plan needs to show the location of parcel boundary					
access points to site, internal driveways, parking lots, circular districtions of the control of	*				
location of water supplies, and location and identification	or proposed activities.				
Applicant: Provide the information requested below	For County Use Only				
Source of potable water	<ul> <li>For Environmental Health Department Use</li> <li>Meets Health Requirements: Yes No</li> </ul>				
,	Number of portable toilets required				
Type of sanitation facilities	Conditions of Approval:				
	Approved By:				
Number of Toilets	Date:				
N. 1. 6.1: 1	For Sheriff's Department Use				
Number of vehicular access points	Traffic Control Attendants Required:				
	Yes No, if yes how many?				
Locations of vehicular access points	<ul> <li>Parking Lot Control Attendants Required:</li> <li>Yes No, if yes, How many?</li> </ul>				
	Conditions of Approval:				
	Approved By:				
	Date:				
Number of On-Site Parking Spaces	For Engineering Division Use				
Driveway to Parking Area Provided: Yes No	<ul> <li>Driveway is Adequate: Yes No</li> <li>Cash Bond required to insure repair of road</li> </ul>				
Describe method to be used to control dust in the parking	damage: Yes No				
lot	Cash Bond required to insure debris is cleared:				
	Yes No				
Name of the person or group who is responsible for the	Conditions of Approval:				
clearing of all debris and temporary structures after the closing of the event?					
ciosing of the event?	Approved By:				
Will be a second of the second	Date:				
With adherence to required conditions, the proposed Temp with the standards in ICC 17.03.180.V and will not disrup					
is approved for the	dates of with				
the hours of operation confined to	<u> </u>				
It is the responsibility of the applicant:					
To arrange and provide all water and sanitation as app					
<ul> <li>To arrange for and provide all necessary traffic and pa County Sheriff's Department;</li> </ul>	arking control attendants as prescribed by the Island				
<ul> <li>To provide for the control of dust in the parking lot, er repaired, and clear all debris and temporary structures by Island County Engineering; and</li> </ul>	nsure any damage to public roads is immediately swithin thirty days after the end of the event as required				
• To follow the approved plan and meet all additional co	onditions listed above by county departments.				
Approved By:	Date:				
Island County Planning & Community De					